Under the Paperwork Reduction Act of 1995, no persons are re	equired to resp	pond to a colle	ection of informat	tion unless it displ	ays a valid OMB con	trol number.
		Docket No.		6930-67263		<u> </u>
PATENT APPLICATION	First Inve	First Inventor		Francis J. Fry		A. C.
TRANSMITTAL	Title			ABLATIO	N SYSTEM	S ₁ S
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label		EL 894 010		_3 % /
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	contents.		ADDRESS T	O: Commission	atent Application ner for Patents 450 VA 22313-1450	2227
1.	2] CFR 1.63(d) completed) R(S) eting inventor see 37 CFR muation-in-p tino nutric disclos f the accomp	9. 10. 11. 12. 13. 14. 15. 16. 17. 16. 17. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	Computer cleotide and/or opticable, all necessity and computer it. Specification is seen in the computer it. Statement in the computer	or CD-R in duplication Request use of the postcard (specifically itemize to pure the pure the postcard (specifically itemize to pure the postcard (specifically itemize to pure the pure the postcard (specifically itemize to pure the pu	cate, large table ondix) equence Submission (CRF) experiment (CRF) isting on: D-R (2 copies); or g identity of above LICATION PAF r sheet & document t Power of ment (if applicable) 9 Copies (Citations) (MPEP 503) (MPEP 503) (MODOCUMENT(S) (MPER 35 U.S.C. 12 st attach form PTC) preliminary amendm 09/647,317	e copies RTS Int(s)) If Attorney In is supplied or
Address						
Address						
City	State			Zip Code		
Country	Telephone			Fax		
		F	Registration No	O. (Attorney/Agent)	27321)
Name (Print/Type) Richard D. Conard	Man	L	_1	Date	9/22/2003	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any noticiting gathering, preparing, and submitting the completed application form to the OSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature

Complete if Known

Application Number Unknown

PTO/SB/17 (5-03)
Approved for use through 04/30/2003. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

for FY 2003		Filing Date		Herew	Herewith (September 22, 2003)			
Effective 01/01/2003. Patent fees are subject to annual revision	on.	n. First Named Inve		Invent	tor Franci	Francis J. Fry		
Applicant claims small entity status. See 37 CFR 1.2	27	Examiner Name			Unkno	Unknown		
		Group Art Unit			Unknown			
TOTAL AMOUNT OF PAYMENT (\$) \$41:	1.00	Attor	ney Do	cket No	o. 6930-6	7263		
METHOD OF PAYMENT (check all that apply)				FEE	CALCULA	ATION (co	ontinued)	
Check Credit card Money Other None			DNAL F					
Deposit Account:	Large Fee	ntity Fee		<u>Entity</u> Fee	Eoo	Description	on.	Fee Paid
Deposit Account 10-0435	Code 1051	(\$) 130	2051	(\$) 65 S	Surcharge - late	-		reeraid
Number	1052	50	2052		-	-	filing fee or cover	
Deposit Account	1		}	-	heet		•	
Name	1053	130 2,520	1053 1812 :		lon - English si		arte reexamination	<u> </u>
The Director is authorized to: (check all that apply)	1804		ĺ				IR prior to Examiner	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendency of this application	,			а	iction			<u></u>
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805 1		Requesting pub action	ilcation of S	IR after Examiner	
to the above-identified deposit account.	1251	110	2251	55 E	xtension for re	ply within fir	st month	
FEE CALCULATION	1252	410	2252		xtension for re			
1. BASIC FILING FEE	1253	930	2253	_	xtension for re			
Large Entity Small Entity Fee Fee Fee Fee Description	•	1,450	2254		xtension for re			
Code (\$) Code (\$)	1	1,970	2255		Extension for re Notice of Appea		ın montn	<u></u>
1001 750 2001 375 Utility filing fee 375.00	1401 1402	320 320	2401		filing a brief in s		n anneal	
1002 330 2002 165 Design filing	1403	280	2403		Request for oral		парросі	
1003 520 2003 260 Plant filing fee 1004 750 2004 375 Reissue filing	L	1,510	1451			· ·	use proceeding	
1004 750 2004 375 Reissue filing 1005 160 2005 80 Provisional filing fee	1452	110	2452		Petition to revive	e - unavoida	able	
SUBTOTAL (1) (\$) \$375.00	1453	1,300	2453	650 P	etition to revive	e - unintenti	onal	
	1501	1,300	2501	650 U	Jtility issue fee	(or reissue)		
2. EXTRA CLAIM FEES FOR UTILITY AND Fee from	1502	470	2502	235 D	Design issue fe	е		
Extra Claims below Fee Paid Total Claims 24 -20** = 4 X 9.00 = 36.00	1503	630	2503	315 P	Plant issue fee			
Independent $2 - 3** = 0 \times = 0.00$	1460	130	1460		etitions to the			
Claims Multiple Dependent =	1807	50	1807	_	rocessing fee			
Large Entity Small Entity	1806	180	1806		Submission of Ir Statement	ntormation L	Disclosure	
Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40 R	Recording each times number o	patent assi	gnment per property	
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375 F	iling a submiss	ion after fin	•	
1201 84 2201 42 Independent claims in excess of 3	1810	750	2810		37 CFR § 1.12 For each addition		n to be examined	
1203 280 2203 140 Multiple dependent claim, if not paid	(l		(3	37 CFR § 1.12	29(b))		
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801		•		mination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802		Request for exp of a design appl		iinauon	
and over original patent	Oth	er fee (:	specify)					
SUBTOTAL (2) (\$) \$36.00								
**or number previously paid, if greater; For Reissues, see above *Reduced				Filing Fe	ee Paid	SUBTO	TAL (3) (\$)	
SUBMITTED BY Complete (if applicable)						===		
Name (Print/Type) Richard D. Conard	Registration No. (Attorney/Agent) 273			27321	Telephone			
Maria	-	Agent)						
Signature Date September 22, 2003 WARNING: Information on this form may become public Credit card information should						2003		

not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

CERTIFICATE OF Applicant(s): Fry et al.	MAILING BY "EXPRESS I	MAIL" (37 CFR 1.10)	Docket No. 6930-67263				
Serial No. Unknown	Filing Date Herewith (9/22/2003)	Examiner Unknown	Group Art Unit Unknown				
Invention: ABLATION	SYSTEM						
I hereby certify that the	e following correspondence:						
L							
	(Identify type of	of correspondence)					
is being deposited with	n the United States Postal Service	e "Express Mail Post Office to	Addressee" service under 37				
	ope addressed to: Commissioner						
CFR 1.10 III all eliveic	pe addressed to. Commissioner	TO Faterits, F.O. Box 1430, F	Mexandria, VA 22313-1430 011				
	September 22, 2003						
	(Date)						
		Vina Tar					
		Kim Tyl (Typed or Printed Name of Person					
		(Typea or Trimea Name officerson	/ 1				
		Am	the				
•		(Signature of Person Mailin	g Correspondence)				
•		FL 894 016	729 US				
•	EL 894 016 729 US ("Express Mail" Mailing Label Number)						
		(Dispress Main Manning	2				
	Make Back was as word ba	:44:G46:1:					
	Note: Each paper must na	ve its own certificate of mailing.					
	*						